| AMENDMENT TRANSMITTAL LETTER | | | | | | Docket No. 2815-0290PUS1 | |
|--|---|---|-----------------------------------|-----------------|----------|-----------------------------|--|
| Application No. | | Filing Date | | Examiner | | Art Unit | |
| 10/521,559-Conf. #2342 | | January 19, 2005 | | B. L. Coleman | | 1624 | |
| Applicant(s): Dan PETERS et al. | | | | | | | |
| INVANTION" | BICYCLONON. PTOR LIGAND | | CANE DERI | VATIVES AND THE | IR USE A | S OPIOID | |
| MS Amendment Commissioner for P.O. Box 1450 Alexandria, VA 223 Transmitted here | 313-1450 with is an ame | | | • • | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | | | |
| CLAIMS AS AMENDED | | | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | | | |
| Total Claims | 10 | - 20 = | 0 | x 50.00 | | 0.00 | |
| Independent Claims | 1 | - 3 = | 0 | x 200.00 | | 0.00 | |
| Multiple Dependent Claims (check if applicable) | | | | | | | |
| Other fee (please specify): | | | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | | 0.00 | |
| x Large Entity Small Entity | | | | | | | |
| x No additional fee is required for this amendment. | | | | | | | |
| Please charge Deposit Account No in the amount of \$ A duplicate copy of this sheet is enclosed. | | | | | | | |
| A check in the amount of \$ is enclosed. | | | | | | | |
| Payment by credit card. Form PTO-2038 is attached. | | | | | | | |
| The Director is hereby authorized to charge and credit Deposit Account No02-2448 as described below. A duplicate copy of this sheet is enclosed. | | | | | | | |
| x Credit any overpayment. | | | | | | | |
| Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | | | |
| Dated: | | | | | May 14 | , 2007 | |
| BIRCH, STEW 8110 Gatehous Suite 100 East | | H & BIRCH, LI | _P | | | | |
| P.O. Box 747 Falls Church, V (703) 205-8000 | | 0747 | | | | | |
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